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Class Specifications for the

ORIENTATION THERAPY SERIES

This series includes those classes, the duties of which are to perform, advise on and/or supervise professional work in the training of blind and visually handicapped persons to orient to physical surroundings and travel independently.

Orientation therapy is concerned with the encouragement, development and sustaining of a blind person to attain and continue in travel and other physical movement in common place and usual circumstances, as well as in strange and unusual circumstances. Exercise, muscle re-education, and improved sensitivity to aural and kinesthetic cues are required, as well as training in mobility techniques including the use of canes and sighted persons, orientation to specific routes to be traversed regularly, orientation in new and unusual circumstances, the use of public transportation facilities, the use of elevators and escalators; etc.

Orientation therapists serve as members of rehabilitation teams consisting of social workers, occupational therapists, vocational rehabilitation specialists, home economists and others. They participate in the review and evaluation of patients, and the development and integration of plans and activities for improving the physical, emotional, social and economic condition of the blind and visually handicapped.

This series encompasses direct service, and supervisory and consultant positions. Class levels are distinguished on the basis of the purpose and scope of work, the nature and extent of supervision received; the nature and scope of recommendations, commitments and decisions; personal work contacts, the nature and extent of supervision exercised, and knowledge and abilities required.

This series replaces the following State of Hawaii Class:
Mobility Instructor for the Visually Handicapped 3.375

APPROVED: May 15, 1967

(Mrs.) EDNA TAVARES TAUFAASAU Director of Personnel Services

ORIENTATION THERAPIST II

6.363

Duties Summary:

Under general supervision, plans and conducts training in mobility procedures and techniques; makes progress and evaluation reports; and performs other duties as required.

Distinguishing Characteristics:

- 1. Purpose and Scope of Work: This class involves responsibility for planning and conducting training in mobility procedures and techniques applicable to specific and regular circumstances.
- 2. Supervisory Controls: Work of a position in this class is carried out independently in accordance with standard techniques, and the general instructions of a rehabilitation specialist or higher level therapist. Periodic evaluation is made of quality and quantity of work through evaluation of progress and other work reports.
- Nature and Scope of Recommendations, Commitments and Decisions: These are limited to those relating to the needs of individual patients and the specific techniques employed in each case, as governed by established policy. Responsible consideration to broad program concerns such as staff utilization, program goals and evaluation, basic revision in techniques, etc., is not characteristic of this level.

- 4. Personal Work Contacts: Contacts at this level primarily concern the establishment and maintenance of rapport with assigned patients. Some public contact may be involved in demonstrating techniques and explaining activities to groups and individuals.
- 5. Knowledge and Abilities Required:

Knowledge of: Human anatomy as related to kinesthetics; kinesiology; techniques and methods in mobility training; the effect of physical disability on the behavior and personality of individuals; implications of blindness and dynamics of rehabilitation.

Ability to: Plan and conduct instruction in standard mobility training methods and techniques; and learn specialized orientation methods and techniques; deal effectively with patients and work well with other staff members; demonstrate mobility techniques to others, and speak effectively; keep records and prepare reports.

Typical Duties:

Observe and evaluates coordination, balance, gait and posture of patients; plans and instructs in exercises to improve the posture, muscle tone and movement of patients; trains patients in the use of canes and sighted persons, and instructs family members in their assistance to patients; orients patients to their immediate neighborhoods, and public buildings, including the use of stairways, elevators and escalators; trains patients in the use of buses and taxis, and in boarding and disembarking from them; trains patients to independently and safely traverse specific routes traveled regularly, such as from home to school or home to work; arranges for transportation and provides canes; reports on the attitudes, progress and condition of patients; and participates in developing and conducting recreational and social events for patients; demonstrates mobility techniques and explains activities to interested groups and individuals; prepares reports and maintains work records.

ORIENTATION THERAPIST III

6.364

Duties Summary:

Plans and conducts training in all orientation and mobility procedures and techniques; makes progress and evaluation reports; and performs other duties as required.

Distinguishing Characteristics:

- 1. Purpose and Scope of Work: This class involves responsibility for planning and conducting training in orientation and mobility procedures and techniques not only applicable to specific and regular circumstances, but to provide for increased sensitivity and improved attentiveness to stimuli so that orientation even in a strange local, such as would be involved in a trip to the mainland, would be quickly achieved. Training involves the development of coordination, physical conditioning and instruction in various techniques and the full use of other senses.
- Supervisory Controls: Work is performed independently 2. in accordance with standard mobility and specialized orientation techniques, and the general instructions of a rehabilitation specialist or higher level therapist. Periodic evaluation is made of quality and quantity of work through review or progress and other work reports.
- 3. Nature and Scope of Recommendations, Commitments and Decisions: Same as for Level II.
- 4. Personal Work Contacts: Same as for Level II.
- 5. Knowledge and Abilities Required:

Knowledge of: In addition to knowledge required at the next lower level, requirements include a knowledge of physiological psychology, and techniques and methods of training in orientation.

Ability to: In addition to abilities required at the next lower level, as applicable, requirements include ability to plan and conduct training in orientation.

Typical Duties:

Observes and evaluates coordination, balance, gait and posture of patients; plans and provides instruction including various drills, lessons, exercises, tests and training to develop coordination, muscle senses and hearing, and teach direction, safety, body posture, use of public transportation including aircraft, use of sound cues, etc.; maintains client records, and requisitions and maintains equipment and supplies; participates as a member of a rehabilitation team in evaluating clients, and works cooperatively to achieve the maximum rehabilitation of such clients; may provide consultation and assistance to other staff members in orientation techniques and procedures; demonstrates orientation and mobility procedures and techniques and explains activities to interested groups and individuals; may assist in developing community resources, such as promoting use of facilities and volunteers; may assist other agencies in organizing and in staff training for orientation and mobility training activities; keeps abreast of developments in the field; prepares reports and maintains work records.

ORIENTATION THERAPIST IV

6.365

Duties Summary:

Plans, develops, performs and directs orientation therapy services in a rehabilitation program; supervises professional orientation therapy workers; and performs other duties as required.

Distinguishing Characteristics:

1. <u>Purpose and Scope of Work</u>: This class involves responsibility for mobility and orientation services in a program for the rehabilitation of blind and visually handicapped persons. This responsibility is

expressed in the planning, development, and directing of these services.

- 2. Supervisory Controls: Work is performed within the broad framework of the policies and functions of a program for the rehabilitation of the blind and visually handicapped, and in accordance with all applicable mobility and orientation techniques and general directions from a rehabilitation specialist having overall responsibility for the various functions of the program.
- 3. Nature and Scope of Recommendations, Commitments and Decisions: A position at this level includes making recommendations on program goals, needs and activities, and commitment of subordinate staff time.
- 4. Personal Work Contacts: Personal contacts are with patients in providing services with other staff in the integration of services with other program functions, and with other agencies and interested groups and individuals in providing consultation and securing support and assistance.
- 5. Nature of Supervision Exercised: A position at this level supervises a small staff of therapists and volunteers. Supervision includes assignment of cases, reviewing case progress, advising on techniques, etc.
- 6. Knowledge and Abilities Required:

Knowledge of: In addition to knowledge required at the next lower level, requirements include a knowledge of the management of orientation therapy services; give and receive oral and written instructions; secure the cooperation and assistance of other agencies, groups and volunteers.

Ability to: In addition to abilities required at the next lower level, requirements include ability to plan, develop and direct orientation therapy services; give and receive oral and written instructions; secure

the cooperation and assistance of other agencies, groups and volunteers.

Typical Duties:

Plans, develops directs and performs services for the training of blind persons and the visually handicapped in mobility and orientation techniques and procedures; advises and/or instructs subordinates, volunteers and other staff on techniques and procedures; provides consultation to other agencies; recommends revisions in program procedures, and supply and staff needs; assigns and reviews the work of subordinates; participates in evaluation conferences, and reports the attitudes, progress and condition of patients; maintains reports and prepares reports.